

Wichita County Employment Application

900 Seventh Street, Room 132, Wichita Falls, Texas 76301, Office (940) 766-8108, Fax (940) 766-8277

FILL OUT THIS APPLICATION CLEARLY AND COMPLETELY. In order to be eligible for employment, an application must be submitted for each position as it becomes available. Applications and attachments, once submitted, become the property of Wichita County and are not to be returned.

| | | | | | | | |
|---|-------------|--|--------------|---|-----------------------|---|-----------------------|
| Position | | Salary Desired | | Date of Application | | Date Available | |
| Last Name | | First Name | | Middle Name | | Home Telephone # | |
| Street Address | | City | | State | | Zip | |
| Drivers License Number | | State | | Class | | *Are you at least 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | | | | Referred By | |
| WORKING CONDITIONS | | | | | | | |
| If it were <u>REQUIRED</u> for the performance of the job, would you work: | | | | | | | |
| Overtime | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | Evenings | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Rotating Shifts | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | Weekends | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | | | | Nights <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | | | | Holidays <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| EDUCATION, TRAINING AND OTHER JOB-RELATED INFORMATION | | | | | | | |
| High School | | | City | | | State | |
| | | | | | | Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| If you did not graduate from High School, list highest grade completed: | | | | GED <input type="checkbox"/> No <input type="checkbox"/> Yes | | Date received: | |
| | Name | City | State | Hours Completed | Dates Attended | | Type of Degree |
| | | | | | From | To | |
| College | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Trade School | | | | | | | |
| | | | | | | | |
| Other | | | | | | | |
| | | | | | | | |
| List certifications, licenses, professional registrations or other credentials | | | | | | U.S. Veteran status? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Check any skills you have: | | | | Have you ever taken a typing test with TWC? | | | |
| <input type="checkbox"/> Type _____ WPM | | <input type="checkbox"/> Ten Key By Touch | | <input type="checkbox"/> No <input type="checkbox"/> Yes/Date _____ | | | |
| <input type="checkbox"/> Shorthand _____ WPM | | <input type="checkbox"/> Personal Computer | | | | | |
| <input type="checkbox"/> Bilingual _____ | | <input type="checkbox"/> Dictaphone | | | | | |
| <input type="checkbox"/> Other _____ | | | | | | | |
| Except for minor traffic violations, have you ever been convicted of a felony or a misdemeanor? | | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Have you ever been placed on probation? | | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Has a court found evidence substantiating your guilt in a crime and deferred proceedings? | | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| If the answer is YES to any of the above questions, describe all incidents on an additional sheet of paper. | | | | | | | |
| PERSONAL REFERENCES | | | | | | | |
| Name two persons not related to you who have knowledge of your character, ability and experience in a work situation. | | | | | | | |
| Name | | Address | | City | | State | |
| | | | | | | | |
| | | | | | | | |
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| | | | | | | | |
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| RELATIVES EMPLOYED BY WICHITA COUNTY | | | | | | | |
| Name | | Department | | | | Relationship | |
| | | | | | | | |
| | | | | | | | |

*Must be at least 21 years of age to work for Juvenile Detention, Juvenile Probation, or Adult Probation (CSCD)

AN EQUAL OPPORTUNITY EMPLOYER

1. The Work History must be completed in order for your application to be accepted and considered.
2. Please list most recent job first, including relevant volunteer experience.
3. Additional information, including resumes, may be attached to support but not replace, the fully completed application.
4. Copies of all required licenses, certifications and other documentation must be attached to the application upon submission.
5. No additional information will be accepted for consideration after the closing date.
6. If hired, you must provide documentation verifying your identity and authorization to work in the United States within 3 days from the date of hire.

| | | | | |
|--------------------------------|------------------------|---------------------------|------------------------|-------------------------|
| Date of Employment | | Employer's Name | | |
| From (Month/Year) | To (Month/Year) | Complete Address | | |
| | | City/State/Zip | | Telephone Number |
| Type of Business | | Job Title | Starting Salary | Final Salary |
| Supervisor's Name/Title | | Reason For Leaving | | |
| Description of Duties | | | | |

| | | | | |
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| Supervisor's Name/Title | | Reason For Leaving | |
| Description of Duties | | | |

Information/Reference Release

PLEASE READ CAREFULLY BEFORE SIGNING THIS APPLICATION

NOTE: All references below to Wichita County apply to and include any Wichita County section, department, entity, or CSCD.

1. I authorize Wichita County to investigate all statements in this application. I affirm that this information is accurate and correct. I authorize Wichita County to secure any necessary information from my former employers, references, and academic institutions. I authorize Wichita County to perform a criminal and driving history records check. I hereby release these employers, references, and academic institutions and Wichita County from any liability arising from the giving or receiving of this information about my employment history, my academic credentials, qualifications, criminal/driving history, and/or my suitability for employment with Wichita County.
2. I am aware that this is an application and not an offer of employment, and neither is this contract (implied or verbal) with Wichita County. I am aware that by signing this, Wichita County has in no way made any offer of employment at a future date.
3. I am aware that any false statements made on my application (and/or resumes, documents, etc.) with the specific intent to mislead Wichita County and/or to intentionally hide damaging job related information that may affect my performance on the job and place Wichita County at liability may be grounds for dismissal if I am hired, regardless of the length of my employment with Wichita County.
4. I am aware that Wichita County is an AT WILL EMPLOYER and if I am offered a job, I do not have any contracts with Wichita County, implied, verbal, or actual. I am at liberty to terminate my employment without notice and Wichita County is able to change any policy in existence without notifying me in advance.

I authorize Wichita County to contact my current employer. Yes No

Signature of Applicant

Date

AN EQUAL OPPORTUNITY EMPLOYER: It is the policy of Wichita County to recruit, hire, train, and promote persons in all job categories without regard to race, color, national origin, religion, sex, age, or handicap. It is the policy of Wichita County to consider the best-qualified individuals according to ADAAA standards. Requested reasonable accommodations will be considered and final accommodation determinations will be done by department heads after consultation. Contact the Human Resources Director, designated ADAAA representative, for special needs at (940) 766-8108.